

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NORTH CAROLINA - NEW BERN DIVISION

Case number (if known) \_\_\_\_\_

Chapter you are filing under:

☐ Chapter 7☐ Chapter 11☐ Chapter 12☒ Chapter 13☐ Check if this an amended filing**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Clifford

First name

Earl

Middle name

Hutton

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx-xx-1785

Debtor 1 Clifford Earl Hutton

Case number (if known) \_\_\_\_\_

**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**☒ I have not used any business name or EINs.☐ I have not used any business name or EINs.Include trade names and *doing business as* names

Business name(s) \_\_\_\_\_

Business name(s) \_\_\_\_\_

EINs \_\_\_\_\_

EINs \_\_\_\_\_

**5. Where you live**290 Dell Brock Road  
Beulaville, NC 28518

Number, Street, City, State &amp; ZIP Code

Onslow

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State &amp; ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State &amp; ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State &amp; ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

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☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Clifford Earl Hutton

Case number (if known)

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☐ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☒ Chapter 13
- 
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
- 
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- |                |            |                   |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
- 
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No.
- ☐ Yes.
- |                             |                           |
|-----------------------------|---------------------------|
| Debtor _____                | Relationship to you _____ |
| District _____              | When _____                |
| Case number, if known _____ |                           |
| Debtor _____                | Relationship to you _____ |
| District _____              | When _____                |
| Case number, if known _____ |                           |
- 
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Clifford Earl Hutton

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor****12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State &amp; ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No.☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State &amp; Zip Code

Debtor 1 Clifford Earl Hutton

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

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- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Clifford Earl Hutton

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?	16a.	<b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.		
	16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.		
	16c.	State the type of debts you owe that are not consumer debts or business debts		
<hr/>				
17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No.	I am not filing under Chapter 7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
<hr/>				
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000	
<hr/>				
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion	
<hr/>				
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion	

**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Clifford Earl Hutton

Clifford Earl Hutton

Signature of Debtor 1

Signature of Debtor 2

Executed on July 7, 2017

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1 Clifford Earl Hutton

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one****If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Blake Y. Boyette

Signature of Attorney for Debtor

Date

July 7, 2017

MM / DD / YYYY

Blake Y. Boyette

Printed name

Stubbs & Perdue, P.A.

Firm name

PO Box 1654New Bern, NC 28563

Number, Street, City, State &amp; ZIP Code

Contact phone 252-633-2700

Email address \_\_\_\_\_

44239

Bar number &amp; State

# DECAF

DEBT EDUCATION AND CERTIFICATION FOUNDATION

Certificate Number: 27000-NCE-CC-149939269229

## Certificate of Credit Counseling

I certify that on July 6th, 2017, at 08:58 PM o'clock CDT

Clifford Hutton received from Debt Education and Certification

Foundation, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling

in the Eastern District of North Carolina, an individual briefing (including a briefing conducted

by Internet and Phone) that complied with the provisions of 11 U.S.C. §§ 109(h)

and 111. A debt repayment plan was not prepared.

Date: July 6th, 2017

By: /s/Morgan Quintana

Name: Morgan Quintana

Title: Counselor

Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).



CLIFFORD EARL HUTTON  
290 DELL BROCKROAD  
BEULAVILLE, NC 28518

BLAKE Y. BOYETTE  
STUBBS & PERDUE, P.A.  
PO BOX 1654  
NEW BERN, NC 28563

SECURITIES & EXCHANGE COM  
OFFICE OF REORGANIZATION  
950 E PACES FERRY RD NE 900  
ATLANTA, GA 30326-1382

SECRETARY OF TREASURY  
ATTN: MANAGING AGENT  
1500 PENNSYLVANIA AVE NW  
WASHINGTON, DC 20220

NC DEPT OF REVENUE  
ATTN: MANAGING AGENT  
PO BOX 1168  
RALEIGH, NC 27602

UNITED STATES ATTORNEY  
ATTN: CIVIL PROCESS CLERK  
310 NEW BERN AVENUE  
FEDERAL BLDG SUITE 800  
RALEIGH, NC 27601-1461

INTERNAL REVENUE SERVICE  
ATTN: MANAGING AGENT  
PO BOX 7346  
PHILADELPHIA, PA 19101-7346

IRS  
ALAMANCE BLDG MAIL STOP 24  
4905 KOGER BLVD  
GREENSBORO, NC 27407-2734

ATTORNEY GENERAL  
950 PENNSYLVANIA AVENUE NW  
WASHINGTON, DC 20530

N.C. DEPT. OF COMMERCE, DES  
ATTN: MANAGER OR AGENT  
P.O. BOX 26504  
RALEIGH, NC 27611

AMERICAN MEDICAL COLLECTION AG  
ATTN: MANAGER, AGENT, OFFICER  
4 WESTCHESTER PLAZA  
SUITE 110  
ELMSFORD, NY 10523

BASS & ASSOCIATES, P.C.  
ATTN: MANAGER, AGENT, OFFIC  
3936 E FT LOWELL RD STE 200  
TUCSON, AZ 85712-1083

BERNHARDT AND STRAWSER PA  
ATTN: MANAGER, AGENT, OFFICER  
5821 FAIRVIEW ROAD  
CHARLOTTE, NC 28209

CASEY J. HUTTON  
290 DELL BROCKROAD  
BEULAVILLE, NC 28518

FINANCIAL AGENT SVS  
ATTN: MANAGER, AGENT, OFFIC  
PO BOX 2576  
SPRINGFIELD, IL 62708

FIRST DATA MERCHANT SERVICES  
ATTN: MANAGER, AGENT, OFFICER  
PO BOX 407092  
FORT LAUDERDALE, FL 33340

FORD MOTOR CREDIT  
ATTN: MANAGER, AGENT, OFFICER  
PO BOX 62180  
COLORADO SPRINGS, CO 80962

FRANKLIN COLLECTION SERVICE  
ATTN: MANAGER, AGENT, OFFIC  
PO BOX 3910  
TUPELO, MS 38801

JACKSONVILLE CHILDREN'S CLINIC  
ATTN: MANAGER, AGENT, OFFICER  
120 MEMORIAL DRIVE  
JACKSONVILLE, NC 28546

NAVY FEDERAL CR UNION  
ATTN: MANAGER, AGENT, OFFICER  
PO BOX 3700  
MERRIFIELD, VA 22119

NC DEPARTMENT OF REVENUE  
ATTN: MANAGER, AGENT, OFFIC  
P.O. BOX 1168  
RALEIGH, NC 27602-1168

ONEMAIN  
ATTN: MANAGER, AGENT, OFFICER  
601 NW 2ND ST  
EVANSVILLE, IN 47708

ONslow COUNTY TAX COLLECTOR  
ATTN: MANAGER, AGENT, OFFICER  
234 NW CORRIDOR BLVD  
JACKSONVILLE, NC 28540-5309

ONslow MEMORIAL HOSPITAL  
ATTN: MANAGING AGENT  
317 WESTERN BLVD  
JACKSONVILLE, NC 28546

PALADIN COMMERCIAL GROUP  
ATTN: MANAGER, AGENT, OFFICER  
12200 E BRIARWOOD AVE, STE 250  
ENGLEWOOD, CO 80112

PREMIER PERFORMANCE PRODUCTS  
ATTN: MANAGER, AGENT, OFFICER  
278 E. DIVIDENT DR.  
REXBURG, ID 83440

PRINCIPIS CAPITAL LLC  
ATTN: MANAGER, AGENT, OFFIC  
111 TOWN SQUARE PLACE  
STE 700  
JERSEY CITY, NJ 07310

SCA COLLECTIONS, INC  
ATTN: MANAGER, AGENT, OFFICER  
PO BOX 910  
EDENTON, NC 27932

SOLSTAS LAP PARTNERS  
ATTN: MANAGER, AGENT, OFFICER  
1915 S 17TH ST, #100  
WILMINGTON, NC 28401

SPRINGLEAF FINANCIAL SVS  
ATTN: MANAGER, AGENT, OFFIC  
521 YOPP RD, STE 212  
JACKSONVILLE, NC 28540

STUBBS & PERDUE, P.A.  
310 CRAVEN STREET  
PO BOX 1654  
NEW BERN, NC 28563-1654

TAROFF & TAITZ LLP  
ATTN: MANAGER, AGENT, OFFICER  
ONE CORPORATE DR, STE 102  
BOHEMIA, NY 11716

THOMAS ZUREK  
C/O J. HEGG LAW PLLC  
ATTN: MANAGER, AGENT, OFFIC  
310 NEW BRIDGE STREET  
JACKSONVILLE, NC 28540

TIMOTHY R. OSWALT  
ATTORNEY AT LAW  
ATTN: MANAGER, AGENT, OFFICER  
825 GUM BRANCH ROAD, SUITE 131  
JACKSONVILLE, NC 28540

TRIPLE-C DIESEL PERFORM., LLC  
ATTN: MANAGER, AGENT, OFFICER  
602 RICHLANDS HIGHWAY  
JACKSONVILLE, NC 28540-3655

WELLS FARGO HOME MORTGAG  
ATTN: MANAGER, AGENT, OFFIC  
MAC #2302-04E  
DES MOINES, IA 50306